DATENT ADDITION FOR DECOMPANY						Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective December 29, 1999							Pheliaus,				
CLAIMS AS FILED - PART I						SMA	LL ENTITY		OTHE	R THAN	
FOR NUMBER FILED NUMBER EXTRA						TYP		OR	SMALL	ENTITY	
B/	ASIC FEE					RAT		-	RATE	FEE	
	OTAL CLAIMS	10	2   minus 20= • 10			, ,	345.00	OR		690.00	
-						X\$ 9	= 404	OR	· X\$18=		
MULTIPLE DEPENDENT CLAIM PRESENT					X39		OR	X78=			
	the difference	+130	=	OR	+260=	•					
. "		TOTA	IT 183	OR	TOTAL						
_/					(Column 3)	SMAI	L ENTITY	OR	OTHER SMALL		
MENT A		REMAINING AFTER AMENDMENT			PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMEN	Total	.2	Minus	. 121	= /	X\$ 9	=	OR	X\$18=		
AM	Independent FIRST PRESE		Minus UI TIPI E DE	PENDENT CLAIM	<u> </u> =	X39=	. /	OR	X78=	/	
						+130	=	OR	+260=/		
							AL EE	OR	TOTAL ADDIT/FEE		
	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST						,				
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	:	RATE	ADDI- TIONAL FEE	
	Total <sup>-</sup>	•	Minus	••	=	X\$ 9=		OR	X\$18=		
AME	Independent	MTATION OF M	Minus	***	=	X39=	:	OR	X78=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							OR	+260=	,	
							AL E	OR	TOTAL ADDIT. FEE		
		(Column 1) CLAIMS		(Column 2)	(Column 3)						
AMENDMENT C		REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE			RATE	ADDI- TIONAL	
	Total	•	Minus	••	=	X\$ 9=	FEE		· X\$18≃	FEE	
ME	Independent	•	Minus	•••	=			OR			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					X39=		OR	X78=		
• 11	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, and a TOTAL										
1	"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										
OBM 870.878											